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CONFIRMATION NO. 8394

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/450,969	<b>FILING OR 371(c) DATE</b> 11/29/1999 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1637	<b>ATTORNEY DOCKET NO.</b> PATH99-09A
<b>APPLICANTS</b> LYNN DOUCETTE-STAMM, FRAMINGHAM, MA; DAVID BUSH, SOMERVILLE, MA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/134,001 08/13/1998 PAT 6,380,370 which claims benefit of 60/064,964 11/08/1997 This application 09/450,969 claims benefit of 60/055,779 08/14/1997				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/12/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 31
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 12		
<b>ADDRESS</b> 25291				
<b>TITLE</b> NUCLEIC ACID AND AMINO ACID SEQUENCES RELATING TO STAPHYLOCOCCUS EPIDERMIDIS FOR DIAGNOSTICS AND THERAPEUTICS				
<b>FILING FEE RECEIVED</b> 1720	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	